PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09759993

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			25				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	or	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			25 minus 20=		. 5			X\$ 9=		OR	X\$18=	90.00
INDEPENDENT CLAIMS			.3 minus 3 =		. 0			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PR			RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "C					r "0" in c	olumn 2		TOTAL		OR	TOTAL	800.00
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	20	Minus	2	25_	=		X\$ 9=		OR	X\$18=	
	Independent	3	Minus	*** *	3	=		X40=		OR	X80=	
L	FIRST PRESEN	ITATION OF M	ULTIPLE DEPI	ENDEN	I CLAIM			+135=		OR	+270=	
	\mathcal{Q}							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	<u> </u>	(Column 1)			ımn 2)	(Column 3)	4					
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 34	Minus	(25	= 9		X\$ 9=		OR	X\$18=	162
	Independent	, 1	Minus	***	3	= 4		X40=		OR	X80=	336
	FIRST PRESEN	ITATION OF M	ULTIPLE DEP	ENDEN	IT CLAIM		ָ נ	+135=		OR	+270=	
	•							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)_	(Column 3						
ENTC		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER YOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	IULTIPLE DEF	PENDE	NT CLAIM		J	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
l "	*If the "Highest Nur	nhar Draviouchy I	Daid For" IN THI	S SPACI	F is less th	an 3. enter "3."				ox in c	olumn 1.	